

**Application Data Sheet****Application Information**

Application number:: Unknown  
Filing Date:: July 10, 2006  
Application Type:: Regular  
Title:: HEADGEAR CONNECTION  
ASSEMBLY FOR A  
RESPIRATORY MASK  
ASSEMBLY  
Attorney Docket Number:: 4398-567  
Total Drawing Sheets:: 27  
Small Entity?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Memduh  
Family Name:: GUNEY  
City of Residence:: Killara  
Country of Residence:: New South Wales, Australia  
Street of mailing address:: c/o RESMED LTD., 1 Elizabeth MacArthur Drive  
City of mailing address:: Bella Vista  
Country of mailing address:: New South Wales,  
Australia  
Postal or Zip Code of mailing address:: 2153  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Amal  
Family Name:: AMARASINGHE

City of Residence::	Beecroft
Country of Residence::	New South Wales, Australia
Street of mailing address::	c/o RESMED LTD., 1 Elizabeth MacArthur Drive
City of mailing address::	Bella Vista
Country of mailing address::	New South Wales, Australia
Postal or Zip Code of mailing address::	2153
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Perry
Family Name::	LITHGOW
City of Residence::	Glenwood
Country of Residence::	New South Wales, Australia
Street of mailing address::	c/o RESMED LTD., 1 Elizabeth MacArthur Drive
City of mailing address::	Bella Vista
Country of mailing address::	New South Wales, Australia
Postal or Zip Code of mailing address::	2153
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Milind
Family Name::	RAJE
City of Residence::	Wentworthville
Country of Residence::	New South Wales, Australia
Street of mailing address::	c/o RESMED LTD., 1 Elizabeth MacArthur Drive
City of mailing address::	Bella Vista
Country of mailing address::	New South Wales, Australia
Postal or Zip Code of mailing address::	2153

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Aaron
Family Name::	DAVIDSON
City of Residence::	Newport
Country of Residence::	New South Wales, Australia
Street of mailing address::	c/o RESMED LTD., 1 Elizabeth MacArthur Drive
City of mailing address::	Bella Vista
Country of mailing address::	New South Wales, Australia
Postal or Zip Code of mailing address::	2153
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Michael
Family Name::	JONES
City of Residence::	Dundas
Country of Residence::	New South Wales, Australia
Street of mailing address::	c/o RESMED LTD., 1 Elizabeth MacArthur Drive
City of mailing address::	Bella Vista
Country of mailing address::	New South Wales, Australia
Postal or Zip Code of mailing address::	2153

#### **Correspondence Information**

Correspondence Customer Number::	23117
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#### **Representative Information**

Representative Customer Number::	23117
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An Application claiming the benefit under 35 USC 119(e)	60/536,735	16 January 2004

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
		DAY/MONTH/YEAR	
PCT	PCT/AU2004/001834	24 December 2004	Yes

**Assignee Information**

Assignee Name::	RESMED LTD.
Street of mailing address::	1 Elizabeth MacArthur Drive
City of mailing address:	Bella Vista
Country of mailing address::	New South Wales, Australia
Postal or Zip Code of mailing	2153
Address::	